

**POLICY FOR SPONSORSHIP OF ACTIVITIES, JOINT WORKING
AND TRAINING AND EDUCATION
BY THE PHARMACEUTICAL INDUSTRY WITH
NOTTINGHAMSHIRE CLINICAL COMMISSIONING GROUPS**

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Document purpose	This policy provides a framework to assist the five Nottinghamshire Clinical Commissioning Groups' staff in determining when commercial sponsorship, joint working agreements or provision of training and education are appropriate when working with the pharmaceutical industry and sets out the standards which should be adhered to
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Nominated Lead	Alison Hale, Prescribing Advisor, Mansfield and Ashfield CCG
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Groups/staff Consulted	
Target audience	The policy covers all five NHS Nottinghamshire CCGs' employed staff, including NHS Nottinghamshire CCG management staff, Clinical Leadership Structure, sub-committees, seconded, sessional or contracted staff and Governing Body members (as part of their remunerated duties). It covers any interaction with Non-NHS organisations such as pharmaceutical companies.
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1. BACKGROUND

Where an organisation or individual seeks to provide sponsorship to the CCG, individual staff members or directorate teams, the principles set out in this policy concerning the acceptance of such sponsorship apply. Particular care must be taken when contractors or potential contractors are offering sponsorship, to avoid the appearance that providing sponsorship is linked to the awarding of any contract or other advantage. Sponsorship should only be accepted where it is assessed that there is a minimal risk of the CCG being criticised for giving preferential treatment to one supplier above another. Any such risk is mitigated by following this policy. A failure to follow this policy regarding sponsorship is likely to expose the CCG to an unacceptable level of risk of criticism. Any offers of sponsorship must be approved by the relevant CCG director in advance.

The context of this policy is shaped by the UK Bribery Act 2010, which revised the legal framework for combating bribery and corruption in the public and private sectors. This act makes it a criminal offence to offer, give or receive a financial or other advantage as a reward for an improper act such as the award of a contract. The Act also introduced a corporate offence (which can lead to an unlimited fine) where an organisation has failed to tackle bribery. The Policy for Sponsorship of Activities, Joint Working and Training and Education by the Pharmaceutical Industry with the five Nottinghamshire CCGs is a key tool to demonstrate that the CCGs have appropriate arrangements in place to meet their responsibilities in protecting both staff and the organisations against any suggestion of impropriety or inappropriate behaviour.

2. PURPOSE

- 2.1 This policy provides a framework to assist the five Nottinghamshire County Clinical Commissioning Groups staff in determining when commercial sponsorship, joint working agreements or provision of training and education are appropriate when working with the pharmaceutical industry and sets out the standards which should be adhered to.
- 2.2 The policy covers all five NHS Nottinghamshire CCGs' employed staff, including NHS Nottinghamshire CCG management staff, Clinical Leadership Structure, sub-committees, seconded, sessional or contracted staff and Governing Body members (as part of their remunerated duties). It covers any interaction with Non-NHS organisations such as pharmaceutical companies.

Independent NHS contractors, such as General Practitioners are advised to adopt this policy or provide the five NHS Nottinghamshire CCG's with similar when providing NHS services as per their contract.

2.3 For definitions of the terms 'sponsorship' and 'joint working' refer to:

- <http://www.uhb.nhs.uk/pdf/DohGiftsGuide.pdf>
- <https://www.networks.nhs.uk/nhs-networks/joint-working-nhs-pharmaceutical/documents/joint%20working%20toolkit%20dh.abpi.pdf>

3. VALUES

In line with the NHS Code of Conduct, the work of the NHS is underpinned by three public service values:

- Accountability – everything done by those who work in the NHS must be able to stand the test of parliamentary scrutiny, public judgements of propriety and professional codes of conduct; agreements should include arrangements for monitoring and evaluation.
- Probity – There should be an absolute standard of honesty in dealing with the assets of the NHS. Integrity should be the hallmark of all personal conduct in decisions affecting patients, staff and suppliers, and in the use of information acquired in the course of NHS duties and;
- Openness – There should be sufficient transparency about NHS activities to promote confidence between the organisation and its staff, patients and the public.

Where any joint working with the pharmaceutical industry is undertaken the conduct of those involved should also adhere to the following values:

- Transparency and trust
- Appropriateness of projects
- Patient focused
- Value for money
- Reasonable contact
- Responsibility
- Impartiality and honesty
- Truthfulness and fairness

All health professionals working within the NHS are reminded that they have a responsibility at all times to comply with their own professional codes of conduct.

4 COMMERCIAL SPONSORSHIP FROM THE PHARMACEUTICAL INDUSTRY

- 4.1. Commercial sponsorship by the Pharmaceutical Industry may include:
- Meetings and Training
 - Projects (including audits)
 - Development and implementation of prescribing strategies, protocols or guidelines
 - Educational leaflets – companies may contribute to the cost of producing leaflets in exchange for the company logo being printed on the leaflet
 - IT and other data collection tools
 - Funding of all or part of the costs of a member of staff
- 4.2. All sponsorship of activities must be in line with the [ABPI Code of Practice](#) and be recorded in the CCG Gifts and Hospitality register.
- 4.3. A written agreement regarding sponsorship must be in place and be signed by all stakeholders involved which sets out what each party has agreed. This will include clearly defined and mutually agreed exit criteria including a break clause enabling termination of the agreement at reasonable notice.
- 4.4. Promotion of any product must not influence or contradict current CCG/Nottinghamshire Area Prescribing Committee guidelines or the Nottinghamshire Joint Formulary.
- 4.5. No sponsorship arrangements are acceptable which compromise clinical judgement.
- 4.6. For all interactions with the Pharmaceutical Industry, patient and data confidentiality must comply with legal and ethical requirements for the protection and use of patient information and other NHS information and must be consistent with Caldicott principles.
- 4.7. It is important, that where hospitality or sponsorship for meetings is sought, that a number of companies are approached to avoid the same company being used too frequently.
- 4.8. Sponsorship of meetings must be declared on the papers for the meeting as well as being included in the Gift & Hospitality register in line with the CCGs Conflicts of Interest Policy.

5. OFFERS OF GIFTS AND HOSPITALITY

Refer to the CCGs gift and hospitality policies:

NHS Mansfield and Ashfield CCG

<http://www.mansfieldandashfieldccg.nhs.uk/index.php/governance-and-policy>

NHS Newark and Sherwood CCG <http://www.newarkandsherwood.nhs.uk/resources/>

6. MEETING WITH REPRESENTATIVES FROM THE PHARMACEUTICAL INDUSTRY

- 6.1. It is good practice to only see representatives by appointment, rather than on an ad hoc basis. These should be recorded on the database held by the medicines management team
- 6.2. Representatives wishing to meet with medicines management or prescribing team members should be directed to the [application form](#) on the medicines management website.
NB applications will be reviewed and sent on to the most appropriate team for consideration of benefit of the meeting requested.
- 6.3. The purpose of the visit and who will be attending should be stated in advance, allowing time for preparation.
- 6.4. NHS Staff must not ask for or accept fees for agreeing to meet representatives.
- 6.5. Any material gifts except those which are of insignificant value e.g. pens, memo pads, diaries, calendars, etc. should not be requested or accepted.
- 6.6. Samples of devices such as placebo inhalers may be requested/accepted if required for patient education
- 6.7. Prescribing decisions should always be taken on the basis of best clinical practice and value for money and take into account their impact for the CCG. Any addition or amendment to the Nottinghamshire Joint Formulary requires application and approval by the Nottinghamshire Area Prescribing Committee in the usual manner.
 - Where a branded generic of an approved drug is considered locally, the CCGs will complete a risk assessment and the choice will be approved through the Primary Care Prescribing Group.

- 6.8. Representatives should follow the Association of the British Pharmaceutical Industry (ABPI) code of conduct or their own company code at all times if not ABPI affiliated.
- 6.9. A register of such meetings by any member of the CCG should be held by a nominated holder. Details of the meeting should be submitted to the register holder for entry.

7. JOINT WORKING WITH THE PHARMACEUTICAL INDUSTRY

- 7.1. Any joint working between the NHS and the Pharmaceutical Industry should be conducted in an open and transparent manner. Arrangements should be of mutual benefit, the principle beneficiary must always be the patient. The length of any arrangement entered in to, potential implications for the patient and the NHS and the perceived benefits for all parties involved should be clearly considered and outlined before any joint working is entered into.
- 7.2. Development of CCG wide projects/workstreams which involve joint working with the pharmaceutical industry must be discussed with the CCG prescribing sub group (or equivalent) and governance leads for consideration of the wider impact and any strategic needs.
- 7.3. CCGs may also wish to stipulate additional operating procedures according to their local governance and prescribing procedures.
- 7.4. Every joint working project must have a formal document in place setting out what each party has agreed. It must clearly define the benefits to both parties. Clearly defined, mutually agreed exit criteria must be written into joint working agreements at the outset.
- 7.5. The Department of Health and the Association of the British Pharmaceutical Industry (ABPI) have developed a [joint working toolkit](#). The toolkit should be utilised when considering or developing joint working arrangements.
- 7.6. The agreed work should be conducted in accordance with standard operating procedures agreed by all parties involved prior to the work commencing.
- 7.7. Working agreements should include measurable outcomes, wherever possible.
- 7.8. Clinical responsibility for prescribing remains with the prescriber and no agreement should be made to prescribe specific company products without the prescribers consent. Advice is available for prescribers at all times from the CCG medicines management teams.

- 7.9. Adequate indemnity insurance should be confirmed, for all involved, prior to the commencement of the joint working arrangement.
- 7.9. Assurance should be sought regarding the competence of the staff involved in delivering joint working projects prior to commencement.
- 7.10. Appropriate clinical governance arrangements should be written into all joint working agreements.
- 7.11. Confidentiality of information received in the course of duty must be respected and never used outside the scope of the specific project.

8. TRAINING AND EDUCATION

- 8.1. Managers must take care to ensure that staff are not pressurised by the sponsors of training to alter their own practice to accord with the sponsors wishes. Any change in practice should only occur based on a consideration of all the appropriate evidence. It must be borne in mind that sponsoring companies are likely to present a narrow range of evidence supporting the use of their product, rather than an unbiased review of all the options.
- 8.2. Industry representatives may sponsor the venue, refreshments and place on the course of attendees for local educational meetings.
- 8.3. The sponsor does not have the right to present teaching material.
- 8.4. Where course material is provided by the sponsoring company, there should be no promotion of specific products (the name of the company supporting the training event is acceptable).
- 8.5. For training or educational events to be attended by clinicians the following broad rules should be followed:
 - If the event involves a specific clinical area and Pharmaceutical Industry support is planned, all relevant major manufacturers in line with the Nottinghamshire Joint Formulary or Nottinghamshire Area Prescribing Committee guidance should be invited to sponsor the event. This is important to avoid the impression of bias being given. Where there are a large number of manufacturers, a selection of sponsorship should be considered not from just one single manufacturer.
 - Where meetings are for a non-clinical topic or for a general audience, a rotation of major manufacturers should be used.
- 8.6. With any sponsored event, certain basic principles apply:

- The session must have a clear educational content.
- The venue must be appropriate and conducive to the main purpose of the event; lavish, extravagant or deluxe venues must not be used, companies must not sponsor or organise entertainment (such as sporting or leisure events) and companies must avoid using venues that are renowned for their entertainment facilities.
- The subsistence associated with the event must be secondary to the nature of the session, must be appropriate and not out of proportion to the occasion.
- The sponsoring companies will be allowed to set up display stands prior to the event in a suitable space, to mingle with and talk to participants before the event and during coffee and lunch breaks. A single item of printed material from the company may be placed on chairs prior to the event at the discretion of the organiser.
- All display materials and printed hand-outs must not contradict the Nottinghamshire Joint Formulary or any Area Prescribing Committee guidelines.
- Industry representatives will not be allowed to attend the business part of the event unless they would otherwise be entitled so to do as a member of the public.
- No discussion will be entered into with the company about timings, speakers, content or any other aspect of the event that would reasonably be controlled by the CCG.

9. UK BRIBERY ACT 2010 / COUNTER FRAUD GUIDANCE

9.1. The UK Bribery Act 2010 has replaced previous Prevention of Corruption Acts and created two criminal offences relating to bribery:

- Offering or giving a bribe to induce someone to behave, or to reward someone for behaving improperly and;
- Requesting or accepting a bribe in exchange for acting improperly, or where the request or acceptance is itself improper

A new corporate criminal offence has also been introduced

- Negligent failing by a company or limited liability partnership to prevent bribery being given or offered by an employee or agent on behalf of that organisation

All staff working for, or representing the five groups are required to be aware of the UK Bribery Act 2010 and should also refer to the groups' Fraud, Bribery and Corruption Policies for further details.

9.2. All five Nottinghamshire CCGs will view instances where this policy is not followed as extremely serious and may take disciplinary action against individuals as a result which may in turn result in dismissal. The CCGs will also automatically and immediately refer all cases of potential fraud corruption and bribery to the CCGs' NHS Counter Fraud Specialist for consideration of criminal investigation and potential prosecution. Referrals will also be made where appropriate, to the pertinent professional regulatory body such as the GMC and NMC. The CCGs will always seek to use the most effective means to recover any taxpayer funding lost

due to fraud, corruption or bribery. This may be via the criminal courts using the Proceeds of Crime Act, or civil recovery.

Fraud

The Fraud Act 2006 came into force on the 15 January 2007 and introduced the general offence of fraud. This is broken down into a number of key areas in terms of criminal offences including;

- Fraud by false representation
- Fraud by failing to disclose information
- Fraud by abuse of position
- Possession and making or supplying articles for use in fraud
- Obtaining Services Dishonestly

Individuals who fail to disclose relevant interests, outside employment or receipts of gifts or hospitality as required by this policy or the group's Standing Orders/Financial Instructions and other related financial policies, such as the Gifts and Hospitality Policy may be subject to the varying forms of criminal, disciplinary and regulatory actions as listed on the previous page of this policy document advising about how the five CCGs will treat all potential policy breaches.

Reporting Suspicions

All cases of suspected fraud, corruption, or bribery must be investigated by an accredited NHS Local Counter Fraud Specialist appointed by each group. The CCGs' appointed Counter Fraud Specialist is Ian Morris, telephone 0116 225 6120. Email ian.morris@360assurance.nhs.uk Or reports can be made directly through the Assistant Chief Officer and Corporate Director.

The Raising Concerns at Work (Whistleblowing Policy) details the procedure for Individuals to follow if they have concerns about any malpractice connected with the CCGs, without fear of adverse repercussions. Public Concern at Work a registered charity can be contacted for help and advice by email UK advice line: whistle@pcaw.org.uk or phone - Whistleblowing Advice Line: 020 7404 6609.

The Head of Governance is responsible for maintaining the Register of Interests holding the Gifts and Hospitality Register and reviewing the implementation of this policy within each of the five groups.

The Accountable Officer – The Chief Officer of each group has ultimate accountability for the strategic and operational management of the organisation including ensuring all policies are adhered to.

The CCG Governing Bodies – will ratify this policy for use throughout the five groups.

The five groups encourage all individuals to raise any concerns that they may have about the conduct of others in the CCGs or the way in which they are run.

The CCGs are committed to the principle of public accountability and will investigate genuine and reasonable concerns expressed by Individuals relating to malpractice within the groups. Individuals will not be discriminated against or suffer a detriment as a result of making such a disclosure, as laid down by the Public Interest Disclosure Act 1998 (PIDA).

10. REFERENCES

- <http://www.uhb.nhs.uk/pdf/DohGiftsGuide.pdf>
- <https://www.networks.nhs.uk/nhs-networks/joint-working-nhs-pharmaceutical/documents/joint%20working%20toolkit%20dh.abpi.pdf>
- <http://www.pmcpa.org.uk/thecode/Pages/default.aspx>
- <http://www.abpi.org.uk/our-work/value-access/Pages/joint-working.aspx>

11. ACKNOWLEDGEMENTS

- NHS Bedfordshire Clinical Commissioning Group – Pharmaceutical sponsorship policy for working with non NHS organisations
- NHS Mid Essex Clinical Commissioning Group – Working with the pharmaceutical industry